

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004062

FILED  
Apr 12, 2006  
Secretary of State

Entity Name: CURRIN-PATTERSON, LAVELLE PROPERTIES LLC

**Current Principal Place of Business:**

2915 PROVIDENCE ROAD, SUITE 300  
CHARLOTTE, NC 28211

**New Principal Place of Business:**

319 S SHARON AMITY ROAD, SUITE 300  
CHARLOTTE, NC 28211

**Current Mailing Address:**

2915 PROVIDENCE ROAD, SUITE 300  
CHARLOTTE, NC 28211

**New Mailing Address:**

319 S SHARON AMITY ROAD, SUITE 300  
CHARLOTTE, NC 28211

FEI Number: 56-2374633

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAVELLE, LOIS  
1303 LANDEROS LANE  
LADY LAKE, FL 32159 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LAVELLE, MICHAEL  
Address: 2915 PROVIDENCE ROAD, SUITE 300  
City-St-Zip: CHARLOTTE, NC 28211

Title: MGRM ( ) Delete  
Name: CURRIN, GEORGE S  
Address: 723 S SHARON AMITY RD SUITE 110  
City-St-Zip: CHARLOTTE, NC 28211

Title: MGRM ( ) Delete  
Name: PATTERSON, LARRY H  
Address: 723 S SHARON AMITY RD SUITE 110  
City-St-Zip: CHARLOTTE, NC 28211

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LAVELLE, MICHAEL  
Address: 319 S SHARON AMITY ROAD, SUITE 300  
City-St-Zip: CHARLOTTE, NC 28211

Title: MGRM (X) Change ( ) Addition  
Name: CURRIN, GEORGE S  
Address: 319 S SHARON AMITY RD SUITE 300  
City-St-Zip: CHARLOTTE, NC 28211

Title: MGRM (X) Change ( ) Addition  
Name: PATTERSON, LARRY H  
Address: 319 S SHARON AMITY RD SUITE 300  
City-St-Zip: CHARLOTTE, NC 28211

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MICHAEL LAVELLE

MGRM

04/12/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date